FEC FORM 1

## STATEMENT OF ORGANIZATION

FORM 1		RGANIZA	ATION		
		(See instruction	ns)		Office use only
NAME OF COMMITTEE (iii	n full)	(Check if name is changed)	Example: If typying, type over the lines	12FE4M5	
NATIONAL A	CTIVE AND RETIR	ED FEDERAL EN	IPLOYEES ASSOCIATION	POLITICAL AC	
ADDRESS (number and	d street)	NORTH WASHING	GTON STREET		
(Check if addre	ss LLL				
is changed)	ALE	KANDRIA		LVA]	22314   - 1914
			CITY▲	STATE	ZIP CODE 📥
COMMITTEE'S E-MA	AIL ADDRESS (Please	provide only one e-n	nail address)		
(Check if addre	ss budf	in@narfe.org			
is ontainges)					
COMMITTEE'S WEE	B PAGE ADDRESS (U	RI)			
	www	.narfe.org			1
(Check if addre is changed)	ss III				<del></del>
2. DATE <b>M</b>	M / D D / Y	2009			
3. FEC IDENTIFICATION NUMBER C C00091561					
4. IS THIS STATE	MENT X NEW	(N) OR	AMENDED (A)		
I certify that I have exar	nined this Statement and	to the best of my know	vledge and belief it is true, correct ar	nd complete	
Type or Print Name of	f Treasurer	л. RICHARD С С	OSTERGREN		
Typo or Time Hamo o					
Signature of Treasure	er Electronically File	d by Mr. RICHA	RD C OSTERGREN	Date 0 4	D 2 4 Y 2 0 0 9
NOTE: Submission of			subject the person signing this Stat	·	es of 2 U.S.C. S437g.
Office			For further information		FEC FORM 1
Use Only			Federal Election Commiss Toll Free 800-424-9530 Local 202-694-1100	sion	(Revised 02/2009)